



**WAIVER, RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS
AND INDEMNITY AGREEMENT**

BY AGREEING TO THIS DOCUMENT, I WILL WAIVE CERTAIN LEGAL RIGHTS INCLUDING THE RIGHT TO SUE.

Participation in the sport of pickleball and use of any recreational facilities involves a risk of accidental injury or death. I acknowledge that there are risks involved with playing pickleball including, but not limited to, cuts, sprains, muscles tears, broken bones, eye and head injuries and other physical injuries.

I assume all risks and hazards incidental to the game, and I, my heirs, executors and administrators release from responsibility and agree to indemnify and hold harmless Valleystream Pickleball Club, their officers, directors and volunteers and all employees from any and all liability, including negligence, for any loss, illness, damage, expense or injury, including death, that I may suffer.

I agree that the sole responsibility for my safety remains with me. This includes, for example, the use of appropriate equipment such as proper footwear and protective eyewear. I will make every effort to take all reasonable safety precautions and to obey all club rules and I will ask for clarification if needed.

Being of legal age, I have read the previous paragraphs fully, and I know, understand and appreciate these and other risks that are inherent in the activity of pickleball. I hereby assert that my participation is voluntary and that I knowingly assume all such risks. *If the participant is a minor (i.e. not of legal age), a parent or guardian must agree on their behalf and also ensure that the minor is made fully aware of what this document and the documents referenced above entail.*

BY SIGNING THIS WAIVER FORM, I AGREE TO HOLD THE CLUB ENTIRELY FREE FROM ANY LIABILITY, INCLUDING FINANCIAL LIABILITY, FOR INJURIES INCURRED REGARDLESS OF THE REASONS OR CIRCUMSTANCES.

Name

Signature

Date